BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10769035

			•		•				·	•		
		CLAIMS A	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			16				ſ	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
Τi	OTAL CHARGE	ABLE CLAIMS	1 4 minus 20=		*	B		X\$ 9=		OR	X\$18=	. ·
IN	DEPENDENT C	LAIMS	(minus 3 =		*	1		X43=	43	OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT				ľ	+145=	-,\-	OR	+290=	
. * 1	f the difference	in column 1 js	less than z	ero, enter	"0" jn <u>(</u>	column 2	, L	TOTAL	428	OR	TOTAL	
	C	LAIMS AS A	MENDE	MENDED - PART II (Column 2)				SMALL E		or	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
						L	TOTAL ODIT. FEE		OR	TOTAL ADDIT: FEE		
		(Column 1)		(Colum		. (Column 3)		JUNITUL E				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	`
(Column 1) (Column 2) (Column 3)												
MEN		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA			ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	VTATION OF MU	LTIPLE DEP	ENDENT	CLAIM			145=		1	+290=	
* 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR L	TOTAL	
444	the "Highest Nun	nber Previously Pai nber Previously Pai ner Previously Paid	d For" IN THIS	SPACE is	less than	. 3, enter "3."		on the appro		^	DDIT. FEE L mn 1.	